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PATENTS ZIW

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EN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Attorney Docket No. <u>UV-1 Cont. 2</u>

Examiner: Hai V. Tran

Art Unit: 2611

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

REQUEST FOR CONTINUED EXAMINATION

Sir:

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Ja	This is a request for continued examination under 37 C.F.R. § 1.114, pending prior Application No. 09/770,865 (Confirmation No. 7787), filed on nuary 26, 2001 of Thomas R. Lemmons et al. for INTERACTIVE PROGRAM GUIDE STEMS AND PROCESSES.
1.	Please enter the Amendment Pursuant to 37 C.F.R. § 1.116 filed on in Application No.
2.	Please consider the arguments in the Appeal Brief or Reply Brief filed on in Application No
3.	x An Amendment/Reply is enclosed.
4.	Affidavit(s)/Declaration(s) is/are enclosed.
5.	An Information Disclosure Statement is enclosed.
6.	A suspension of action on the above-identified patent application is requested under 37 C.F.R. § 1.103(c) for a period of months.
7.	A check in the amount of \$ in payment of the fee under 37 C.F.R. § 1.17(e) is enclosed.
8.	\overline{X} Please charge Deposit Account No. $\underline{06-1075}$, Order No. $\underline{003597.0001}$ in paymen of the fee under 37 C.F.R. § 1.17(e). A duplicate copy of this Request is enclosed.
9.	The Director is hereby authorized to charge in additional fees required under 37 C.F.R. § 1.17(e) in connection with this Request, or to credit an overpayment of same, to Deposit Account No. 06-1075, Order No. 003597.0001 A duplicate copy of this Request is enclosed.
10	Please grant a one-month, two-month, three-month, four-month, extension of time under 37 C.F.R. § 1.136(a) to the Examiner's Action of September 8, 2005 in the above-identified patent application.
11	A check in the amount of \$ in payment of the extension-of-time fee is enclosed.
	The Director is hereby authorized to charge payment of any additional extension-of-time fees required under 37 C.F.R. § 1.17 in connection wit this paper, or to credit any overpayment of same, to Deposit Account No. 06-1075, Order No. 003597.0001. A duplicate copy of this Request is
S MAHM	enclosed. MED1 00000093 061075 09770865

13.	X Please charge the ex	tension-of-time	fee of $$450.00$ to	Deposit Account
	No. <u>06-1075</u> , Order N	To. <u>003597.0001</u> .	A duplicate copy	of this Request is
	enclosed.			

February	8,	2006	
(Dat	:e)		

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